

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000004528

Entity Name: LOVE CENTER INCORPORATED

Current Principal Place of Business:

6037 DUNMIRE AVE
JACKSONVILLE, FL 32219

Current Mailing Address:

6037 DUNMIRE AVE
JACKSONVILLE, FL 32219

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PARKER, VIRLEY M
6037 DUNMIRE AVE
JACKSONVILLE, FL 32219 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Officer/Director Detail :

Title PD
Name PARKER, VIRLEY M
Address 7157 WELLAND RD
City-State-Zip: JACKSONVILLE FL 32209

Title VPD
Name PARKER, IRISH I
Address 329 BROWARD RD
City-State-Zip: JACKSONVILLE FL 32219

Title S
Name JONES, LILLIE M
Address 6007 MONCRIEF RD W
City-State-Zip: JACKSONVILLE FL 32219

Title T
Name CARTER, JOEL S
Address 7875 MONCRIEF DISMORE RD
City-State-Zip: JACKSONVILLE FL 32219

Title D
Name CARTER, JOEL
Address 7875 MONCRIEF DISMORE RD
City-State-Zip: JACKSONVILLE FL 32219

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: VIRLEY M PARKER

PD

03/10/2015

Electronic Signature of Signing Officer/Director Detail

Date